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DEPT OF ENVIRONMENT & NATURAL
RESOURCES - RCRO

APPLICATION FOR PERMIT TO DRILL

Type of work:

☐ Drill New Well ☒ Reenter Well ☐ Drill Directional Well

☐ Other _____

Type of well:

☒ Oil Well ☐ Gas Well ☐ Injection

☐ Other _____

Name and Address of Operator:

Prima Exploration, Inc. 555 E. Hampden Ave., Ste 505, Denver, CO 80231

Telephone

(303) 755-5681

Name and Address of Surface Owner:

State of South Dakota

Name and Address of Drilling Contractor and Rig Number:

J&R Well Service 791 Land 9, Powell, WY 82435

Surface location of well: Qtr-Qtr, Sec, Twp, Rge, County, feet from nearest lines of section, and latitude and longitude (if available):

SHL 724' FSL & 555' FWL, Sec 4-21N-4E, SWSW

If Directional, top of pay and bottom hole location from nearest lines of section: TOP 8575'

NBHL 2400' FSL & 555' FWL, Sec 4-21N-4E, NWSW, WBHL 724' FSL & 1700' FEL, Sec 5-21N-4E, SWSE

Acres in Spacing (Drilling) Unit

20,648 Acres

Description of Spacing Unit

Central South Buffalo Red River "B" Unit, Order # 4-97

Well Name and Number		Elevation	Field and Pool, or Wildcat		Proposed Depth and Formation	
State 14-4		3001 GL	Buffalo		North 10,300' MD	
					8,604' TVD	
					West 10,850' MD	
					8,570' TVD	
Size of Hole	Size of Casing	Weight per Foot	Depth	Cementing Program (amount, type, additives)		
1) 12 1/4"	8 5/8"	36#	6016'	160 sx Poz mix & regular, 2% gel		
2) 7 7/8"	4 1/2"	11.6, 9.5,	8729'	1050 sx Poz mix & regular, 6% gel		
3)		4.7 #				
4)						

Describe Proposed Operations (Clearly State all Pertinent Details, and Give Pertinent Dates, Including Estimated Date of Starting any Proposed Work). Use additional page(s) if appropriate.

The State 14-4 well laterals will be drilled out of existing 4 1/2" casing by cutting a window at least 10' below the Gunton porosity located at 8418-8462', landing in the Red River "B" porosity at 8575'-8591'. Out of this window one lateral will be drilled to the west and a second lateral drilled to the north. We will be using a closed circulating system with cuttings being hauled to a state approved facility. No pit liner will be used.

I hereby certify that the foregoing as to any work or operation performed is a true and correct report of such work or operation.

Signature

RICH GUNLIKSON

Name (Print)

OPERATIONS MANAGER

Title

Date

Approved By:

Title: Oil and Gas Supervisor

Permit No. 1851

API No. 40 063 05059.01

Date Issued: January 11, 2008

Conditions, if any, on attached page.